BEST AVAILABLE COPY -<														
											lication or Docket Number 9910110.			
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY						
TOTAL CLAIMS			20					RATE	FEE		RATE	FEE	•	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	·710.00		
TOTAL CHARGEABLE CLAIMS			20 mini	us 20=	• –			X\$ 9=		OR	· X\$18=			
INDEPENDENT CLAIMS			3 min	us 3 =				X40=		OR	X80=	· · ·		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=		OR	+270=		٠.	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR		<u>-)</u> (o-	17	
72/0 / CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							<i></i>	SMALL	ENTITY	OR	OTHER SMALL	THAN	-	
MTA	,	(Column 1) CLAIMS REMAINING AFTER		HIGI NUM PREVI	HEST MBER HOUSLY	PRESENT EXTRA		RATE	ADDI-' TIONAL FEE		RATE	ADDI- TIONAL FEE		
AMENDMENT	Total	AMENDMENT 3	Minus	• Q:	FOR	-3		X\$ 9=	FEE	OR	X\$18=-	54	ŀ	
MEN	Independent	• 3	Minus	***	3.	•	1	X40=		OR	X80=	F	-	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM-]			1	070			
					¥ + € .	المجوهدان.	: ::	+135= ·	:	OR	+270= . TOTAL	EII		
		~ (Calumin X)		·Cal·	umn 2)	(Column 3)		ADDIT. FEE		JOR	ADDIT. FEE	3 7		
NOMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT	<u>:</u>	HIG	HEST MBER NOUSLY .	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FÈE		
AMENDME	Total	.23	Minus	••2	3	= ·		X\$.9=		OR	X\$18=			
	Independent	• 3	Minus	••••	3	<	1	X40=		OR	Yeo.	-		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=	·	OR	+270=		ŀ	
-		•						TOTAL		OR	TOTAL			
		(Column 1)	•	(Coli	umn 2)	(Column 3)		ADDIT. FEE		1	ADDIT. FEE			
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT		HIG NU PREV	MEST MBER MOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total,	•	Minus	**		=	1	X\$ 9=	, <u></u>	OR	X\$18=			
MEN	Indépendent	•	Minus	***		•		X40=		OR	Y00	 		
114	FIRST PRES	ENTATION OF A	AULTIPLE DE	PENDE	NT CLAIM				<u> </u>	1~			1	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***H the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

OR

+135=

TOTAL ADDIT. FEE

+270=

OR ADDIT: FEE